Intervention: Personalized risk communication

Finding: Sufficient evidence for effectiveness

Potential partners to undertake the intervention:	
□Nonprofits or local coalitions	☐Businesses or labor organizations
Schools or universities	☐Media
	Local public health departments
☐State public health departments	☐ Policymakers
☐ Hospitals, clinics or managed care organizations	Other:

Background on the intervention:

Informed decision making is seen as a means to promote appropriate use of screening practices. This intervention involves a health care worker collecting information from an individual that facilitates the creation of a personal 'risk profile,' providing additional information for the consumer to use in making screening decisions. The Health Belief Model is often cited as the theoretical model for this intervention.

Findings from the systematic reviews:

Overall, sufficient evidence for effectiveness was found to recommend personalized risk communication for increasing providers' screening rates. Although risk communication was not found to raise the overall rate of screening, it did significantly raise screening rates for women classified as high-risk.

Limitations/Comments:

Personalized risk communication is a relatively new strategy for increasing screening rates for physicians. While the number of studies that have evaluated its effectiveness is not large, the studies all point to similar conclusions. Nearly all of these studies were undertaken in a university setting, with women patients. In addition, these studies only examined breast and cervical cancer screening.

References:

Edwards A, Unigwe S, Elwyn G, Hood K. Personalised risk communication for informed decision making about entering screening programs. Cochrane Database of Systematic Reviews 2004; 4.

Forbes C, Jepson R, Martin-Hirsch P. Interventions targeted at women to encourage the uptake of cervical screening. Cochrane Database Syst. Rev. 2002;(3)(3):CD002834.